## **Washington Metropolitan Area Transit Commission**

## 2011 Carrier Annual Report Form

## **PLEASE NOTE:**

Telephone Number

rev. 12/28/10

- Each carrier holding a WMATC certificate of authority on January 1, 2011, must file a complete 2011 annual
  report and pay a \$150 annual fee on or before January 31, 2011. To be timely, the report and fee must be
  received at WMATC's office by this date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (\*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a \$100 late fee. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate \$100 late fee.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 3, 2011.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

1. ANNUAL R	EPORT (	OF:		
398	L.W. Tra	ansportation, Inc.		
*WMATC No.	*Name of	Carrier (as shown on certifi	cate of authority)	
4600 Sutton Oal	ks Drive,	Chantilly, VA 20151-252	28	
*Street Address of	Principal P	Place of Business		
Mailing Address (if	different fr	rom street address)		
(703) 955-7801			(703) 955-7815	beth@lw-transportation.com
*Telephone Numbe	r	Other Telephone	Fax Number	E-mail
2. CARRIER O	CONTAC	T PERSON (at mailing a	uddraec to whom we che	auld direct inquiries):
Z. CANNIEN C	CONTAC	I FENSON (at maining a		odia direct inquiries).
Ms. Beth Forsht			Dir. of Charter Sales	
*Name			*Title	
(703) 955-7801			(703) 955-7815	beth@lw-transportation.com
*Telephone Numbe	r	Other Telephone	Fax Number	E-mail
3. REGISTER	ED AGEN	NT INSIDE THE METRO	POLITAN DISTRICT F	OR SERVICE OF PROCESS
				the Metropolitan District):
				nce George's Co., Montgomery Co., a full description, see www.wmatc.gov.
Mexandria,	/ tillington	, i alitax, i alis oriaion, e	and Dulles Allport. Tor	a run description, see www.wmatc.gov.
Name of Registered	d Agent for	Service of Process		
Street Address				

(page 1 of 2)

**Fax Number** 

E-mail

Other Telephone

form the c	of organiza arrier's certi	tion that occu	nerger, consolidation or other char rred after the previous year's annu ority was issued. If no changes are	al report was filed, o	or if not appl	icable, after		
			Michang					
follow vehicl	5. *LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS: Choose one, and only one, of the following three options: (1) list your vehicles below; (2) make any necessary corrections on the enclosed vehicle list, check the box indicating all information is accurate, and return the list with both pages of this form; or (3) attach your own vehicle list to both pages of this form. Include all required information.							
Fleet No.	*Model Year	*Make	*Vehicle VIN (17 digits)	*License Plate Number	*State Registered	*Seating Capacity		
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I certify the		rt, including a	iny attachments, was prepared by n contained in it is true, correct, an			that I have		
ROC	HAD	orak	*Sign	and the				
*Name (Type	() S		· sign	plad in				
*Title			*Date					

WMATC No: 398

## Washington Metropolitan Area Transit Commission

2011 Annual Report: Revenue Vehicle List

Name:

L.W. Transportation, Inc.

Trade Name:

Carriers are required to provide a complete list of revenue vehicles used in WMATC operations. Choose one and only one of the following options: (1) list your vehicles in the space provided on page 2 of the annual report form; (2) make any necessary corrections to this list, check the box indicating all information is accurate, and return this list with both pages of your annual report form; or (3) attach your own vehicle list to both pages of the annual report form. Failure to report revenue vehicles may result in a civil forfeiture.

☐ Check this box if all information on this list, including any corrections, is complete and accurate.

Fleet No.	*Model Year	*Make	*VIN (17 digits)	*Plate	*State Registered	*Capacity
OV 98	2000	International	1HVBEABM7YH333903	H513923	VA	25
OK 99	1998	International	1HVBEABM7WH530874	H513922	VA	22
ck 100	1995	Ford	1FDKE30F3SHC13010	H509981	VA	25
OK 101	1992	MCI	1M8GDM9A7NP044650	H509978	VA	47
Ch 103	1995	MCI	1M8PDMPAXSP047203	H509980	VA	55
<b>()</b> 104	1996	MCI	1M8PDMPA6TP048804	H509979	VA	55
01/106	1998	MCI	1M8TRMPA9WP060255	H509977	VA	54
OK 107	2000	MCI	1M8TRMPA9YP061246	H509898	VA	56
CK 108	2000	MCI	1M8TRMPA2YP061346	H513915	VA	56
<b>0</b> 109	2000	MCI	1M8TRMPA1YP061256	H513938	VA	56
U 110	2000	MCI	1M8TRMPA9YP061280	H515002	VA	56
✓ 114	1986	MCI	1M8DDM8A4GP041003	H513921	VA	47
<b>1</b> 116	1990	MCI	1M8GDM7AXLP043637	H513920	VA	47
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LWT Equipment for 2011

# pax	Fleet No	Model YR	Make	VIN	Plate	State
47	J 101	1992	MCI	1M8GDM9A7NP044650	H509978	VA
25	√ 100	1995	FORD	1FDKE30F3SHC13010	H509981	VA
55	√ 103	1995	MCI	1M8P0MPAXSP047203	H509980	VA
55	√ 104	1996	MCI	1M8PDMPA6TP048804	H509979	VA
54	√106	1998	MCI	1M8TRMPA9WP060255	H509977	VA
56	√107	2000	MCI	1M8TRMPA9YP061246	H509898	VA
56	108	2000	MCI	1M8TRMPA2YP061346	H513915	VA
25	√96	1997	Chev	1GBJG31J2V1078388	H516932	VA
25	V 97	2006	Ford	1FDXE45P06HA26231	H516931	VA
25	/ 98	2000	International	1HVBEABM7YH333903	H513923	VA
22	V 99	1998	International	1HVBEABM7WH530874	H513922	VA
56	√109	2000	MCI	1m8trmpalyp061256	H513938	VA
56	110	2000	MCI	1m8trmpa9yp061280	H515002	VA
55	117	1997	MCI	IM8PDMTA5VP049547	H516960	VA